# 2023 Update on CDC Immunization Recommendations

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4/25/2023, Dane County Immunization Coalition

## Paul Hunter, MD

UW Medical School in Madison 1984 - 1989

UW Residency in Eau Claire 1989 - 1992

Family Medicine 1992 - 2011

Underserved in Milwaukee & Rockford

Public Health & Academic Medicine 2009 -

University of Wisconsin

Community-based projects and research

Teaching public health and medical students

City of Milwaukee Health Department (Imms, STDs, TB)

CDC's Advisory Committee on Immunization Practices 2016-2020



### Disclosures

- Presenter Paul Hunter MD
- Owns stock in Merck, GSK, Pfizer, AstraZeneca,
   Johnson & Johnson, Moderna, Novartis
- Consultant for GSK, Sanofi, Merck, Moderna
- These financial relationships have been mitigated through slide review by the Dane County Immunization Coalition

## Learning Objectives

- Increase knowledge on the updates to the ACIP childhood and adult vaccine schedules.
- Understand different approaches to communicate with families who are vaccine hesitant

### 2023 CDC Immunization Schedules

- Compile all current CDC recommendations for routine (non-travel) vaccinations including all the changes approved in 2022
- Insurance plans required to cover vaccinations listed on this schedule
- Schedules updated annually in February

## 2023 Immunization Schedules: Web, PDF

Child and Adolescent Immunization Schedule

www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html

Adult Immunization Schedule

www.cdc.gov/vaccines/schedules/hcp/imz/adult.html

• Laminated copies on sale at:

https://shop.immunize.org/collections/laminated-immunization-schedules

## 2023 Immunization Schedules: Apps

 CDC Vaccine Schedules app www.cdc.gov/vaccines/schedules/hcp/schedule-app.html#download

Shots Immunizations by STFM/AAFP app

https://play.google.com/store/apps/details?id=org.immunizationed.shotsG3 https://apps.apple.com/us/app/shots-immunizations/id958783646

For pneumococcal vaccines: PneumoRec VaxAdvisor

www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html

## 2023 Imm Schedules: Changes from 2022

### Changes on **Both** Child and Adult

- Added COVID-19 vaccines
- MMR: Add doses in mumps outbreak
   Priorix® (2<sup>nd</sup> MMR product)
- MenB: If 3<sup>rd</sup> dose of Trumenba<sup>®</sup> given < 4 months after 2<sup>nd</sup> dose, give 4<sup>th</sup> dose ≥ 4 months after 3<sup>rd</sup> dose
- Polio: Added dose for age ≥ 18 years and ↑ risk of exposure

www.cdc.gov/vaccines/schedules/hcp/schedule-changes.html

## Adult Hep B - 2023 Imm Schedule Changes

### Hepatitis B

- Age-based replaced risk-based recommendation
  - All 19 59 years <u>should</u> be vaccinated
    - ≥ 60 years with known risk factors **should**
    - ≥ 60 years without known risk factors <u>may</u>
- PreHevbrio<sup>™</sup> (4<sup>th</sup> Hep B product)
  - 3 doses over 6 months, Age ≥ 18 years, VBI Vaccines Delaware

## Adult Zoster - 2023 Imm Schedule Changes

Zoster: On 2022 schedule immunocompromised & ≥ 19 years added 2023 notes added to clarify use of titers & varicella vaccine if negative

- If immunocompetent, positive varicella titer not needed to vaccinate
   U.S. birth before 1980 = immunity (age ≥ 43 years)
  - If immunocompetent & negative titer, then varicella vaccination
- If immunocompromised and no documented history of varicella infection, varicella vaccination, or prior herpes zoster
  - Then varicella vaccination Contra-indicated
    - Except HIV & CD4 ≥ 200 (shared clinical decision)

## Adult Pneumo - 2023 Imm Schedule Changes

### Pneumococcal

Hyperlink to CDC app PneumRecs VaxAdvisor

www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html

## Adult Flu - 2023 Imm Schedule Changes

#### Influenza

- Preferred for age ≥ 65 years:
  - IIV-HD Inactivated high-dose (Fluzone)
  - RIV Recombinant (Flublok)
  - allV Adjuvanted inactivated (Fluad)
    - If none of these 3 available, then give any other, don't wait

## Influenza timing — Guidance since 2022

- Routine annual all persons aged ≥6 months if no contraindications
- Timing Ideally by 10/31, best in September and October
  - Non-pregnant adults not July and August
  - As soon as vaccine available for following groups:
    - Missed opportunity likely
    - Children 6 months 8 years who need 2 doses –
    - Children needing 1 dose (At least 2 doses before 7/1 in previous year)
    - Pregnant in 3<sup>rd</sup> trimester
  - Continue while flu circulating (→ March) & vaccine unexpired (June)

## Child - 2023 Imm Schedule Changes

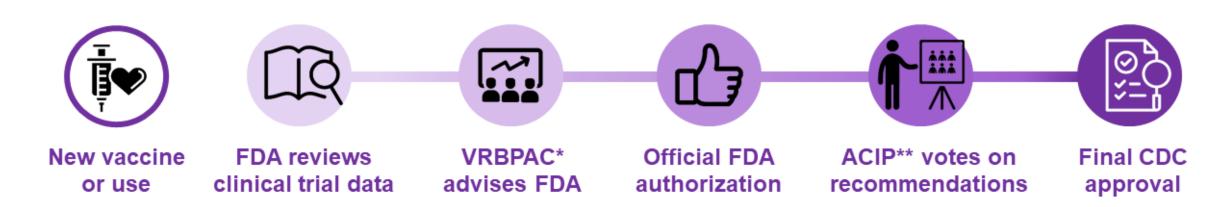
#### Pneumococcal

Added 15-valent conjugate vaccine (PCV15)

### Meningococcal

- MenACWY: New Menveo® 1-vial (all liquid) formulation should not be administered before age 10 years
- MenB: If 2<sup>nd</sup> dose of Trumenba<sup>®</sup> given ≥ 6 months after 1<sup>st</sup> dose,
   3<sup>rd</sup> dose not needed.

### Authorization Process for New Vaccine Use



FDA = Food and Drug Administration VRBPAC = Vaccines and Related Biological Products Advisory Committee

CDC = Centers for Disease Control and Prevention

ACIP = Advisory Committee on Immunization Practices (ACIP)

### Covid Bivalent Boosters

- No more <u>mono</u>valent boosters (except limited Novavax)
- 1 <u>bi</u>valent booster 2 months after last dose
   Age 6 months and older
- 3/14/23 FDA authorized, 3/16 CDC recommended bivalent booster for 6 mo 4 yr who completed 3-dose Pfizer primary series

## Adult Vaccination Rates, USA

#### **Pneumococcal**

- 24% for 19–64y at risk<sup>1</sup>
- 68% for ≥65y<sup>1</sup>

#### Influenza

• 46% for  $\ge 19y^2$ 

#### Tdap

• 30% for  $\ge 19y^1$ 

#### Zoster

• 39% ≥60y ¹

#### Hepatitis B

• 33% for 19–59y w diabetes<sup>2</sup>

- 1. Vaccination Coverage among Adults in the United States, National Health Interview Survey, 2019–2020. https://www.cdc.gov/vaccines/imz-managers/coverage/adultvaxview/pubs-resources/vaccination-coverage-adults-2019-2020.html
- 2. Lu P, et al. Surveillance of Vaccination Coverage Among Adult Populations United States, 2018. MMWR Surveill Summ 2021;70(No. SS-3):1–26.

### Adult Vaccination Recommendations

Pneumococcal: PCV20 or PCV15 + PPSV23

Influenza: In Sept & Oct, Preferred 65+y - IIV-HD & RIV & allV

**Tdap:** q 10 year booster, 3<sup>rd</sup> trimester pregnancy

**Zoster:** Age 50+, RZV=recombinant, 2 dose

Hepatitis A: Risks: chronic liver disease, MSM, drug abuse

Hepatitis B: Age 19-59 years, 60+ years if requested

HPV: 27-45 years minimal benefit SDM. Catch up 19-26 years

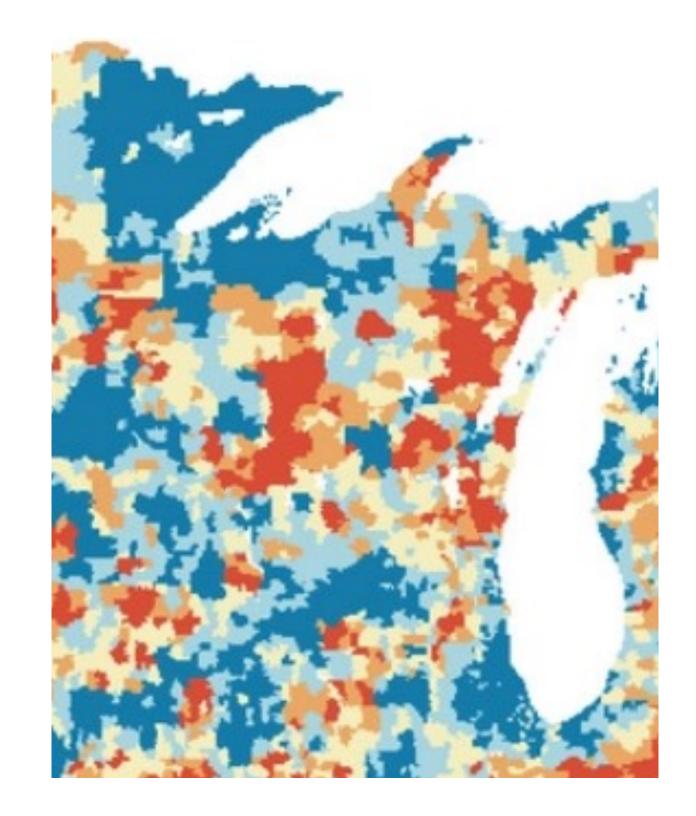
## Addressing vaccine hesitancy

Keeping vaccine conversations open and ongoing will be important ...[because of] variability in stages of readiness, fluidity of people's views, and persuasive power of... health professionals

www.nejm.org/doi/full/10.1056/NEJMra2106441

- Vaccine hesitancy by ZIP code estimated via Facebook surveys
- varies substantially within a county
- 7 to 49% in rural
   Stearns County, MN

www.nejm.org/doi/full/10.1056/ NEJMra2106441



## Vaccine Communication Principles

### P Hunter's suggestions for vaccinators:

- Make simple, clear, consistent recommendations
  - "You are due for vaccines **today** to prevent these diseases"
- Only if objections, then stop & listen to concerns
  - Ask what is the main concern
  - Assume patients have their own welfare as the goal
- Positive messages: Vaccine safety & efficacy
- Build trust <u>Try again</u> at future visit
  - CASE\*: Corroborate, About me, Science, Explain
  - https://www.dhs.wisconsin.gov/publications/p03023.pdf

### Keeping up with Vaccination Recommendations

Know which vaccines to recommend when and why

Subscribe to IZ Express: <a href="www.immunize.org/express/">www.immunize.org/express/</a>

 Latest CDC recommendations in MMWR: www.immunize.org/acip/acip chrono.asp

Ask the Experts: <a href="www.immunize.org/askexperts/">www.immunize.org/askexperts/</a>

## Systemic changes versus Persuasion

- Addressing systemic barriers may be more important than improving communication by vaccinators.
- Health education and persuasion campaigns may be less likely to lead to vaccination than ...
- Decreasing inconveniences and barriers to vaccination
  - Automatically scheduled vaccination appointments
  - Phone and text reminders from doctors' offices and health depts
- http://journals.sagepub.com/stoken/default+domain/10.1177/1529100618760521-free/full

## Use the Registry

#### **Advanced Functions**

- Get training in and regularly use the advanced functions
- Generate reports
  - Remove inactive patients from denominator
  - Document quality measures
  - Identify patients who need to come in for vaccinations

### Benefits of Standing Orders

- Efficient assessment for and administration of vaccines
- Empower nurses & medical assistants
- Improve vaccination rates in your practice.
- Protect more of your patients from preventable diseases
- Decrease opportunities for disease transmission in your clinic

www.immunize.org/standing-orders/

### Increase Access to Immunizations

- Vaccinate at all appointment types including urgent care, follow up for problems, chronic disease management, and physicals
- "Nurse-only" visits for vaccinations
- Use standing orders on a walk-in basis
- Give vaccinations on evenings or weekends
- "Express" vaccination during regular office hours
- Easy-to-access site, separated from usual traffic pattern

## Vaccinate to prevent disease and save lives!

Ask your questions now

Or contact me later

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